| AMENDMENT TRANSMITTAL LETTER   |                                  |                                 |                                  |                                   |          |            |       | Docket No |  |
|--|----------------------------------|---------------------------------|----------------------------------|-----------------------------------|----------|------------|-------|-----------|--|
| Application No.<br>10/789,393-Conf. #4915  |                                  |                                 | Filing Date<br>February 27, 2004 |                                   | Examiner |            |       | Art Unit  |  |
| 10/78  | 9,393-Co                         | ont. #4915                      | February 2                       | 27, 2004                          |          | E. Labbees | ;<br> | 2612      |  |
| Applicant(s): Shuji Yamashita et al.   |                                  |                                 |                                  |                                   |          |            |       |           |  |
| Invention: VEHICULAR REMOTE CONTROL SYSTEM   |                                  |                                 |                                  |                                   |          |            |       |           |  |
| TO THE COMMISSIONER FOR PATENTS  |                                  |                                 |                                  |                                   |          |            |       |           |  |
| Transmitted herewith is an amendment in the above-identified application.                          |                                  |                                 |                                  |                                   |          |            |       |           |  |
| The fee has been calculated and is transmitted as shown below.                                     |                                  |                                 |                                  |                                   |          |            |       |           |  |
|  | CLAIMS AS AMENDED Claims Highest |                                 |                                  |                                   |          |            |       |           |  |
|  |                                  | Remaining<br>After<br>Amendment | Number<br>Previously<br>Paid     | Number<br>Extra Claims<br>Present |          | Rate       |       |           |  |
| Total C  | laims                            | 3                               | - 20 =                           | 0                                 | х        | 50.00      |       | 0.00      |  |
| Indepe<br>Claims   |                                  | 1                               | - 3 =                            | 0                                 | х        | 210.00     |       | 0.00      |  |
| Multiple Dependent Claims (check if applicable)  |                                  |                                 |                                  |                                   |          |            |       |           |  |
| Other fee (please specify):  |                                  |                                 |                                  |                                   |          |            |       |           |  |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00  |                                  |                                 |                                  |                                   |          |            |       | 0.00      |  |
| x Large Entity Small Entity  |                                  |                                 |                                  |                                   |          |            |       |           |  |
| x No additional fee is required for this amendment.  |                                  |                                 |                                  |                                   |          |            |       |           |  |
| Please charge Deposit Account No in the amount of \$  A duplicate copy of this sheet is enclosed.  |                                  |                                 |                                  |                                   |          |            |       |           |  |
| A check in the amount of \$ to cover the filing fee is enclosed.                                   |                                  |                                 |                                  |                                   |          |            |       |           |  |
| Payment by credit card. Form PTO-2038 is attached.   |                                  |                                 |                                  |                                   |          |            |       |           |  |
| The Director is hereby authorized to charge and credit Deposit Account No. 50-0591                 |                                  |                                 |                                  |                                   |          |            |       |           |  |
| as described below. A duplicate copy of this sheet is enclosed.                                    |                                  |                                 |                                  |                                   |          |            |       |           |  |
| x Credit any overpayment.  |                                  |                                 |                                  |                                   |          |            |       |           |  |
| x Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. |                                  |                                 |                                  |                                   |          |            |       |           |  |
| <del>-   ,</del>   | £                                |                                 |                                  |                                   |          |            |       |           |  |
| Thomas K. Scherer  Dated: February 12, 2008  |                                  |                                 |                                  |                                   |          |            |       |           |  |
| Attorney/Agent Reg. No.: 45,079  |                                  |                                 |                                  |                                   |          |            |       |           |  |
| OSHA · LIANG LLP 1221 McKinney St., Suite 2800 Houston, Texas 77010 (713) 228-8600                 |                                  |                                 |                                  |                                   |          |            |       |           |  |
|  |                                  |                                 |                                  |                                   |          |            |       |           |  |
|  |                                  |                                 |                                  |                                   |          |            |       |           |  |